APPENDIX B

UNIVERSAL PRECAUTIONS

www.kdhe.state.ks.us/c-f/special_needs_part2.html

1000 SW Jackson, Suite 200
Topeka, KS 66612-1274
785.296.1300 785.296.4166 (fax)

UNIVERSAL PRECAUTIONS AND INFECTION CONTROL [1]

This section details procedures to be employed for exposure to *all* body fluids, the use of which will significantly reduce the risk of the spread of many diseases. Fluids that should be handled by these measures include blood and blood products, including saliva, sputum, feces, nasal secretions, tears, urine and vomitus.

Universal precautions do not apply to body products such as saliva, sputum, feces, tears, nasal secretions, vomitus and urine unless blood is visible in the material. However, these other fluids and body wastes can be sources of other infections and should be handled as if they are infectious. More conservative measures designed to comply with OSHA standards for bloodborne pathogen exposure control pertain primarily to blood, any body fluids containing visible blood, vaginal secretions, semen, cerebrospinal fluid, synovial fluid and pericardial fluid.

There is no evidence that students with disabilities have more infections and contagious diseases that other students without disabilities. However, every precaution should be taken to prevent the spread of infections.

In response to the increase in Hepatitis B and human immunodeficiency virus (HIV) infections, the Centers for Disease Control and Prevention has recommended "universal blood and body - fluid precautions." These measures are intended to prevent transmission of these and other infections, as well as to decrease the risk of exposure for care-providers and students. Since it is currently not possible to identify all infected individuals, these precautions must be used with every student, regardless of their medical diagnosis.

The single most important step in preventing exposure to and transmission of any infection is anticipating potential contact with infectious materials in routine as well as emergency situations. Based on the type of possible contact, the caregiver should be prepared to use the appropriate precautions and techniques prior to providing care. Diligent and proper hand washing, the use of barriers, appropriate disposal of waste products and needles, and proper decontamination of spills are essential techniques of infection control. Using common sense in the application of these measures will enhance protection of both the caregiver and the student.

Hand Washing

Hand washing is the single most important practice in the fight against transmission of infectious organisms. Hand washing should be encouraged often and especially after using the toilet, before food preparation, before eating, after changing a diaper, after helping with the potty seat, and before and after any other high-risk situations when the hands may have come in contact with body fluids. Adequate facilities - such as warm and cold water, sinks, soap, paper towels, and appropriate waste disposal must be furnished.

Hand Washing Procedure

- Ensure that each hand sink is supplied with dispensable soap and disposable paper towels. Germicidal towelettes or a waterless alcohol-based hand wash should be provided where water is not available.
- Wet hands thoroughly under warm water; use cold water only if warm water is unavailable.
- Dispense soap into wet hands. Bar soap should be used when dispensed soap is unavailable.
- Vigorously rub hands together for one minute, paying particular attention to nails, cuticles, spaces between fingers, and under jewelry. Wash hands above the wrist.
- Thoroughly rinse hands.
- Shake hands to remove excess water.
- Dry hands using a disposable towel. Avoid the use of non-disposable towels.
- After drying hands, use the towel to turn off the water and open the door.
- Dispose of paper towel in a waste receptacle.

Barriers

Barriers include disposable gloves, protective eye wear, masks, and gowns. The use of a barrier is intended to reduce the risk of contact with body fluids with visible blood for the caregiver as well as to control the spread of infectious agents from student to student. It is essential that appropriate barriers be used when contact with potentially infectious material is possible.

Disposable Gloves

In any situation when hands come in direct contact with body fluids or body wastes, the use of disposable gloves is essential. Latex or vinyl medical exam gloves should be supplied by the

school. Latex gloves are more widely used, but vinyl gloves may be necessary to accommodate latex-sensitive students or staff. Food handlers' plastic gloves can be used for diaper-changing and/or when blood is not present.

Disposable Gloves Procedures

- Maintain a supply of latex and vinyl disposable gloves of various sizes in readily accessible locations.
- Slip each hand into a clean glove, pulling it snugly over the fingers to ensure a good fit. Pull glove over the wrist as far as it will go to maximize coverage.
- Do not reuse gloves. Use a different set of gloves for each student.
- Remove first glove by turning the glove inside out as it is pulled over the hand, grasp the glove in remaining gloved hand. During removal of the second glove, avoid touching the outer surface by slipping the fingers of the ungloved hand under the glove and pulling it inside out as it is pulled over the hand, effectively sealing the first glove inside.
- Dispose of the used gloves in a lined waste container.
- Wash hands thoroughly, following hand washing procedures (see previous page).

Other Barriers

- Gowns or aprons may be worn to protect he caregiver's clothing if splattering of body fluids is possible. The apron or gown should be laundered before re-using or disposed of after each care session.
- Protective eye wear and masks should be worn if splashing of body fluids is likely to occur (such as mouth suctioning or a coughing student).
- Chux or other waterproof barriers should be used to cover any work surfaces if drainage or splashing with blood or body fluids is possible. The barrier should be disposed of after each care session and should not be reused.
- For the performance of mouth-to-mouth resuscitation, a disposable mask with a one-way valve may be used. If this is unavailable, gauze or some other porous material can be placed over the mouth and mouth-to-mouth resuscitation given.

Clean up Procedures

Surfaces (floors, walls, counter tops)

- Wear disposable gloves.

- Sprinkle disinfecting absorbent over the spillage and wipe surrounding surfaces with a paper towel. If absorbent powder is not available, spread paper toweling over spill and allow it to soak up the fluid.

- Dispose of the material in a plastic lined waste container. Do not reuse waste liners.

- Spray the affected area with a spray cleaner/disinfectant. A 10 percent bleach solution is an acceptable substitute.

- Wipe the disinfectant from the affected surface after allowing for adequate contact time.

- Dispose of paper towels and gloves in a plastic lined waste container.

- Draw the plastic liner out of the waste container. Tie and immediately dispose of the bag, following normal procedures. Make sure disposable goods are properly labeled with a "Hazardous Materials" label.

- Wash hands thoroughly, following hand washing procedures.

Objects

- Put on disposable gloves. If gloves are not available, use disposable towels as a barrier when handling the object.

- Discard contaminated items that cannot be cleaned.

- Wash objects using clean, warm water and a general-purpose cleaning agent. Use only mops, sponges, or cloths not used on floors, walls, or plumbing fixtures.

- Rinse the object thoroughly in clean water.

- Adequate trash bags should be provided by the school.

- Disinfect or sanitize the object by spraying, swabbing, or immersion in a germicidal solution. A 10 percent bleach solution or commercially available disinfectant is adequate.

- Objects that might be placed in a person's mouth should be rinsed in clear water after they have been disinfected.

Sharps

- Needles, syringes, and other sharp objects should be placed in a metal or other puncture proof container immediately after use.

- To reduce the risk of an accidental needle stick or cut, needles should not be recapped,

bent, or removed from the syringe before disposal.

- Containers should be sealed, double bagged and disposed.

Persons

- Wear disposable gloves.
- Use a paper towel to wipe material from exposed skin, paying particular attention to the face. Allow person to rinse mouth, nose, and eyes with running water, if possible. Germicidal towelettes or waterless, alcohol-based wash should be used when running water is not available.
- Place soiled towels or towelettes in a plastic lined waste container. Urge the person to perform as much of this procedure as possible.
- If practical, remove soiled clothing and place in a plastic bag for laundering later.
- Assist in cleansing the affected body area.
- Put on clean clothing and/or notify lawful custodian to supply clean clothes.
- Soiled clothing should be laundered separately from the rest of the laundry. Use hot water and a cup of bleach in each load.
- Follow procedures for the cleaning of surfaces and objects.
- Remove and dispose of gloves in a plastic lined waste container.
- Pull the liner from the waste container. Tie it and immediately dispose of the bag, following disposal procedures as outlined in the local district policies and procedures on bloodborne pathogens.
- Wash hands thoroughly, following hand washing procedures.
- When helping with a runny nose, coughing, and/or drooling, provide facial tissues and dispose of them in a plastic-lined trash can.
- Wash hands after the procedure is completed.

Laundry

- Whenever possible, disposable barriers should be used if contamination with body fluids or blood is possible.

- If sheets, towels, or clothing do become soiled, they should be handled as little as possible.
- Wash with hot water (at least 125°F) and detergent for at least 25 minutes.
- Cool water washing is also acceptable if an appropriate detergent is used for the water temperature.

Diapering

- Assemble the supplies beforehand. Use disposable diapers.
- Wash hands, following hand washing procedures.
- Put on disposable gloves.
- Place the person on a designated washable changing table or mat, located near the hand sink and used for no other purpose. The use of disposable paper liner is optional.
- Do not leave the person unattended on changing table.
- Remove the soiled diaper, carefully folding inward and wrapping the diaper in its own plastic liner.
- Put the soiled diaper in a small plastic bag and place it in a plastic lined waste container. Cover.
- Cleanse the person's skin with a disposable wipe and appropriate cleaning solution or a moist towelette. Move from front to back to prevent urinary-tract infections, paying particular attention to skin creases.
- Bulk salves, creams, or ointments must be administered from the jar using a disposable spatula. Do not use your bare fingers to apply the materials. Squeezing tubes or bottles are preferred.
- Redress the person.
- Dispose of the spatulas in an appropriate waste container.
- Remove the gloves, following disposable gloves procedures.
- Wash the person's hands with soap and water or wipe with a germicidal towelette if running water is not available.
- Disinfect the change table/mat surface and wipe it dry with a paper towel.

- As frequently as possible, draw the plastic liner out of the waste container, tie, and immediately dispose of it, following school district disposal procedures.

- Wash your hands thoroughly, following hand washing procedures.

- Report abnormal skin, rash, or stool conditions (unusual fecal consistency, color, odor or frequency) to lawful custodian and nurse.

Toilet/Potty Chair

- In the event of a fecal or urine accident, refer to procedures for dealing with contaminated persons and clothing surfaces and objects.

- Assist with the removal of the clothing if necessary.

- Put on disposable gloves if assistance in wiping the person is necessary or if you will come into contact with body fluids.

- Using toilet tissue, a disposable wipe and an appropriate cleaning solution, or a moist, germicidal towelette, wipe the person, moving from front to back, to prevent a urinary-tract infection.

- Assist with redressing if necessary.

- Remove your gloves following disposable gloves procedures.

- Ensure that the person washes his/her hands properly.

- Wash your own hands thoroughly, using hand washing procedures.

When using the potty chair, follow this procedure after the person is dressed, but before removing your gloves:

- Empty the contents of the pot into the toilet.

- Rinse the pot with water. Dispose of the rinse water into the toilet. If rinse water is obtained from handsink, be sure not to splash the sink or faucet.

- Clean the pot with a germicidal solution. Wipe it with a paper towel. Dispose of the paper towel in a plastic-lined waste container.

- Remove your disposable gloves.

- Disinfect the hand sink.

- Wash your hands thoroughly, following hand washing procedures.
- Repeat these procedures for each person.
- Toilet seats should be cleaned with a germicidal solution at least once each day.

Accidental Exposure

Accidental exposure to blood, body products, or body fluids places the exposed individual at risk of infection. This risk varies depending on the type of body fluid (blood vs. respiratory vs. feces), the type of infection (salmonella vs. HIV), and the integrity of the skin that is contaminated.

- Always wash the contaminated area immediately with soap and water.
- If mucous membrane splash (eye or mouth) or contamination of broken skin occurs, irrigate or wash the areas thoroughly.
- If a cut or needle stick injury occurs, wash the area thoroughly with soap and water. In those instances where broken skin, mucous membrane, or needle stick exposures occur, the caregiver should document the incident. The student's lawful custodian should also be notified. The person who had the exposure should follow the school district's policy and procedures on post-exposure episodes.

Pregnant Women

Pregnant women are at no higher risk of infection than other care providers, as long as appropriate precautions are observed. However, due to the possibility of in-utero transmission of viral infections such as cytomegalovirus (CMV) or HIV, as well as the potential for adverse outcomes with these congenitally acquired infections, pregnant women should be especially careful to observe universal precautions.

NOTES

1. Information in this section adapted from:

   Utah State Office of Education. (1995). *Universal Precautions and Infection Control.* Guidelines for Serving Students with Special Health Care Needs. (pp. 40-44).